

10-25-04

3761/4
Rhw

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0851-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

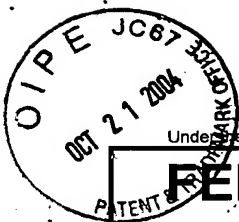
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/039423-Conf. #1748
	Filing Date	January 4, 2002
	First Named Inventor	Nicholas WANT
	Art Unit	3761
	Examiner Name	C. L. Anderson
Total Number of Pages in This Submission	Attorney Docket Number	ATA-232CN

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	LAHIVE & COCKFIELD LLP		
Signature			
Printed name	Kevin J. Canning		
Date	October 21, 2004	Reg. No.	35,470

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL 982737528 US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: October 21, 2004	Signature: (Kevin J. Canning)



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FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 55.00

Complete if Known

Application Number	10/039423-Conf. #1748
Filing Date	January 4, 2002
First Named Inventor	Nicholas WANT
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Art Unit	3761
Attorney Docket No.	ATA-232CN

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit
Account
Number

12-0080

Deposit
Account
Name

Lahive & Cockfield, LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Fee Fee Fee

Code (\$) Code (\$) Fee Description Fee Paid

1001 790 2001 395 Utility filing fee

1002 350 2002 175 Design filing fee

1003 550 2003 275 Plant filing fee

1004 790 2004 395 Reissue filing fee

1005 160 2005 80 Provisional filing fee

SUBTOTAL (1) (\$) 0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims -- = Extra Claims Fee from below Fee Paid

Independent Claims -- = -- x -- =

Multiple Dependent -- = -- x -- =

Large Entity Small Entity

Fee Fee Fee Fee Fee Description

1202 18 2202 9 Claims in excess of 20

1201 88 2201 44 Independent claims in excess of 3

1203 300 2203 150 Multiple dependent claim, if not paid

1204 88 2204 44 ** Reissue independent claims over original patent

1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0.00

**or number previously paid, if greater, For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Fee Fee Fee

Code (\$) Code (\$) Fee Description Fee Paid

1051 130 2051 65 Surcharge - late filing fee or oath

1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet.

1053 130 1053 130 Non-English specification

1812 2,520 1812 2,520 For filing a request for ex parte reexamination

1804 920* 1804 920* Requesting publication of SIR prior to Examiner action

1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action

1251 110 2251 55 Extension for reply within first month

1252 430 2252 215 Extension for reply within second month

1253 980 2253 490 Extension for reply within third month

1254 1,530 2254 765 Extension for reply within fourth month

1255 2,080 2255 1,040 Extension for reply within fifth month

1401 340 2401 170 Notice of Appeal

1402 340 2402 170 Filing a brief in support of an appeal

1403 300 2403 150 Request for oral hearing

1451 1,510 1451 1,510 Petition to institute a public use proceeding

1452 110 2452 55 Petition to revive - unavoidable

1453 1,370 2453 685 Petition to revive - unintentional

1501 1,370 2501 685 Utility issue fee (or reissue)

1502 490 2502 245 Design issue fee

1503 660 2503 330 Plant issue fee

1460 130 1460 130 Petitions to the Commissioner

1807 50 1807 50 Processing fee under 37 CFR 1.17(q)

1806 180 1806 180 Submission of Information Disclosure Stmt

8021 40 8021 40 Recording each patent assignment per property (times number of properties)

1809 790 2809 395 Filing a submission after final rejection (37 CFR 1.129(a))

1810 790 2810 395 For each additional invention to be examined (37CFR 1.129(b))

1801 790 2801 395 Request for Continued Examination (RCE)

1802 900 1802 900 Request for expedited examination of a design application

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 55.00

SUBMITTED BY

Name (Print/Type) Kevin J. Canning

Registration No.
(Attorney/Agent)

35,470

(Complete (if applicable))

Telephone (617) 227-7400

Signature

Kevin J. Canning

Date

October 21, 2004

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